DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

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As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled LOW-COST, NO-FRAGMENT EXPLOSIVE ACCESS TOOL which (check one) 🗵 is attached hereto 🗆 was filed on _____ as United States Application Number or PCT International Application Number and was amended on I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations §1.56. POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number), and hereby certify that the Government of the United States has the irrevocable right to prosecute this application: John L. Forrest, Jr., Reg. No. 29,378; Jacob Shuster, Reg. No. 19,660; Howard Kaiser, Reg. No. 31,381; Mark Homer, Reg. No. 41,848 SEND CORRESPONDENCE TO: Office of Counsel Code OC4 Direct Telephone Calls to: Naval Surface Warfare Center Indian Head Division Mark Homer 101 Strauss Ave., Bldg. D-326 (301) 744-6668 Indian Head, MD 20640-5035 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Full name of first inventor: Michael L. Greene Inventor's Signature ///uhal Residence: Fort Washington, Maryland -Citizenship: United States of America Post Office Address: 13103 Venango Road, Fort Washington, MD 20744-2753 Full name of second inventor: Jacob Tallman Inventor's Signature Residence: Indian Head, Maryland Citizenship: United States of America Post Office Address: P.O. Box 873, Indian Head, MD 20640